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FHS, INU.

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UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

CIVIL ACTION NO. 04-10451-RWZ
CIVIL ACTION NO. 04-10717-RWZ

JOSEPH SCHMITT,
Plaintiff,

v.

JEFFREY SMITH, et al.,
Defendants

AND

JOSEPH SCHMITT,
Plaintiff,

v.

PATRICK MULVEY, et al.,
Defendants.

AFFIDAVIT OF NATALYA PUSHKINA

I, Natalya Pushkina, do on oath depose and state:

1. I am presently employed as the institutional librarian at the Massachusetts Treatment Center ("Treatment Center") located in Bridgewater, Massachusetts. I have held this position since January 2003.
2. The incarcerated population at the Treatment Center, which includes inmates, civil detainees, and civil commitments ("inmates/civils"), regardless of whether they are indigent, are afforded supplies, free of charge, for filing their cases with the courts.
3. These supplies include lined writing paper, 20 sheets per month, typing paper, two sheets at the time, pencils and pens, one per month, and unlimited envelopes, which must be addressed to someone concerning their legal matters, such as a court clerk, attorney, or a qualified examiner, prior to the inmate/civil leaving the library. The inmates/civils are

EXHIBIT

A

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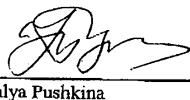
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also provided with copying of their legal documents, free of charge.

4. The inmates/civils have free use of the five typewriters, including corrective ribbons, which are available on a first come, first served basis at the library. On occasion, the inmates/civils may have to wait to use the typewriters. However, they are given the first priority as soon as one is available.

5. If the inmate/civil needs more than the allotted two sheets of typing paper, he may request, and will receive, more as needed. Similarly, if the inmate/civil's pen should run dry, he will be provided with another.

Signed under the pains and penalties of perjury this 20th day of April 2006.



Natalya Pushkina

Attachment A
OBR No. 06-043MASSACHUSETTS TREATMENT CENTER
OBSERVATION OF BEHAVIOR REPORTResident Name Joseph Schmitt Comm. No. 1181137 Unit D-2Date 2/3/06 Time 1030 Reporting Staff DarklewoodBehavior Observed _____ Code No. 3-17, C-11Witness (if any) Manuel Botelho

Referred to District Attorney _____

Type or print in INK your report of the noted behavior. Use the reverse if more space is necessary.

On 2/3/06, at 10:30am, I, its officer John Darklewood, concluded through self-admission that on Feb 1, 2006 Resident Schmitt attempted to exchange his type written ribbon for a Learning Center Ribbon. Resident Schmitt ~~stated~~ reported that the ribbon #4 was in need of replacement upon inspection of the Smith Corona Ribbon Library aide. Manuel Botelho determined that the ribbon Resident Schmitt turned in was not the one he was issued upon arrival to the library. Resident Schmitt removed the label from the ribbon issued and placed it on a ribbon that he brought to the library. On 2/3/06, the ~~actual~~ Library Ribbon was found on a shelf.

Has the resident been placed on pre-hearing restriction? No Yes Approved By _____Type of Restriction(s) NoneReporting Staff signature John Darklewood Date 2/3/06 shift/days off 7-3Shift Commander signature Capt John Ruwe Date 2/3/06Finding and sanction if any Discipline B-17, Guilty C-11, 5 days loss of libraryAppeal results Waived, 2/7/06Reviewing Authority Det. J. H. L. 1 Date 2/7/06

EXHIBIT

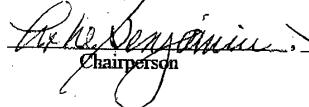
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DEPARTMENT OF CORRECTION
MASSACHUSETTS TREATMENT CENTER
OBSERVATION OF BEHAVIOR REPORT
WAIVER OF HEARING/ENTRY OF GUILTY PLEA

Attachment C

I have been advised that I have the right to appear before the Behavior Review Committee Board concerning the charges pending against me in Observation of Behavior Report #(s) 06-043

I DO NOT wish to appear before the BRC and hereby waive my appearance. I hereby enter a plea of guilty concerning the charges pending but reserve the right to appeal any sanctions which may be imposed. I am signing this document of my own free will and am under no duress, coercion or threats and fully understand the contents and meaning of this document. I have been informed that the BRC members are as follows:

  
Chairperson Board Member Board Member

I have no objections to these staff members considering the disposition in this case.

Joseph Schmidt
Resident Print or Type Name

1181137
Commitment Number

Jeff K. S.
Resident Signature

2-2-06 11 AM
Date/Time

Lt. A. L. Tamm
Staff Witness Print or Type Name

Deputy, Lt.
Title

John B.
Staff Witness Signature

Based on the inmates plea of guilty on the charge(s), and the information provided in the reporting staff member's report, the resident is found guilty and the following sanction(s) imposed for the following reasons (attach additional pages if necessary):

Dismissed B17 GUILTY C-11 5 days loss of liberty

The resident has been given a copy of this document and has been advised of his right to appeal this matter in writing to the Superintendent within fifteen (15) days.

John B.
Staff Signature

2/11/06 11:00 AM
Date/Time

Deputy Superintendent of Operations

Date/Time

Attachment C

DEPARTMENT OF CORRECTION
MASSACHUSETTS TREATMENT CENTER
OBSERVATION OF BEHAVIOR REPORT RECEIPT

OBR No(s) 06-043 Date 2-3-06

Treatment Center Resident Schmidt, Joseph Comin.No. 1481137
was given his copy/copies of the OBR(s) listed above as well as a Representation, Witnesses, Evidence
and/or Tape Recording Form

Served By Lt. Benjamin Date 2-3-06
Signature Benjamin Time 1000AM

ACKNOWLEDGMENT OF SERVICE

Resident's Signature J. H. S. Date 2-7-06 Time 10:45 AM

I personally delivered copies of OBR(s) listed above as well as a Request for Representation,
Witnesses, Evidence and/or Tape Recording Form to resident _____
And he refused to sign the acknowledgment of service.

Staff Person's Signature _____ Date _____
Print Name _____ Time _____

Comments:

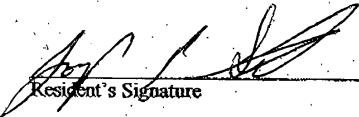
Staff Person's Signature _____

PLEASE RETURN TO DEPUTY'S OFFICE

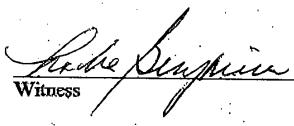
DEPARTMENT OF CORRECTION
MASSACHUSETTS TREATMENT CENTER
BEHAVIOR REVIEW COMMITTEE
APPEAL WAIVER

I, Resident JOSEPH SCHMITT, do hereby waive my right to appeal
OBR number(s) 06-043, and would like to begin serving my sanction
Immediately. I am signing this document of my own free will and am under no duress, coercion or
Threats.

Thank you for your consideration in this matter.


Resident's Signature

2-7-06
Date


Witness

2-7-06
Date